2016-10-17-03-00108444

FEC FORM 3

REPORT OF RECEIPTS

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	For An Authorized Committee				Office Use Only	
1. NAME OF COMMITTEE (i	TYPE OR PRI		ample: If typing, ty er the lines.	/pe 12FE4M	_	
AMERIC	ANA				<u> </u>	
ADDRESS (number and street) 5. ARREDIOINIDIO AVE						
<u>*</u>	Тетт			<u>L</u>		
Check if contact than previous reported.	ously RT A	U.G.U.S.T.I.N.	E	L EL	1320810-LIII	
2. FEC IDENTIF	ICATION NUMBER ▼	CITY ▲		STATE A	ZIP CODE ▲	
C10.0.5	81322	3. IS THIS REPORT	NEW (N) C	OR AMEN	DED STATE ▼ DISTRICT	
(a) Quarterly April July 1	Reports: 15 Quarterly Report (Q1) 15 Quarterly Report (Q2) Der 15 Quarterly Report (Q3) ary 31 Year-End Report (YE) mation Report (TER)	(b) 12-Day PRE-	Primary (12P) Convention (12C)	General Special (in the State of	
5. Covering Perio	od 07 61	2016	through	0.4 3.0	<u> </u>	
I certify that I have Type or Print Name	examined this Report and e of Treasurer	to the best of my known		ef it is true, correct a	nd complete.	
Signature of Treasurer Date Date Date						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.						
Office Use Only			{		FEC FORM 3 (Revised 02/2003)	